

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Fairfax County Democratic Committee

ADDRESS (number and street)

2815 Hartland Rd Suite 100

☐Check if different
than previously
reported. (ACC)

Falls Church

VA

22043

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00277541

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☒

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2009

through

01

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. Bruce H Neilson

Signature of Treasurer

Electronically Filed by Mr. Bruce H Neilson

Date

02

19

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Fairfax County Democratic Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	1	3	1	2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2009		38143.52
(b) Cash on Hand at Beginning of Reporting Period	119781.39	
(c) Total Receipts (from Line 19)	35026.21	35026.21
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	154807.60	73169.73
7. Total Disbursements (from Line 31)	63019.56	63019.56
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	91788.04	10150.17
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Fairfax County Democratic Committee

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	13355.00	13355.00
(i) Itemized (use Schedule A)	20655.00	20655.00
(ii) Unitemized	34010.00	34010.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	1000.00	1000.00
(c) Other Political Committees (such as PACs)	35010.00	35010.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.55	0.55
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	-300.00	-300.00
17. Other Federal Receipts (Dividends, Interest, etc.)	315.66	315.66
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	35026.21	35026.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	35026.21	35026.21

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	48309.23	48309.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	48309.23	48309.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	6300.00	6300.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	8410.33	8410.33
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	8410.33	8410.33
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	63019.56	63019.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	63019.56	63019.56

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	35010.00	35010.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	35010.00	35010.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	48309.23	48309.23
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.55	0.55
38. Net Operating Expenditures (subtract Line 37 from Line 36)	48308.68	48308.68

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Roy Baldwin

Mailing Address 2915 Hunter Mill Rd. #18

City

Oakton

State

VA

Zip Code

22180

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C4089769

Amount of Each Receipt this Period

70.00

B.

Full Name (Last, First, Middle Initial)

Roy Baldwin

Mailing Address 2915 Hunter Mill Rd. #18

City

Oakton

State

VA

Zip Code

22180

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 2 / 2 0 0 9

Transaction ID: C4090661

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Eleanor Bissell Bochner

Mailing Address 9402 Colonnade Dr

City

Vienna

State

VA

Zip Code

22181-6118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Volunteer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C4091640

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

520.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Eleanor Bissell Bochner

Mailing Address 9402 Colonnade Dr

City

Vienna

State

VA

Zip Code

22181-6118

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Volunteer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C4091642

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Jon Bowerbank

Mailing Address PO 40

City

Cedar Bluff

State

VA

Zip Code

24609

FEC ID number of contributing
federal political committee.

C

Name of Employer
EMATS, Inc

Occupation
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 0 / 2 0 0 9

Transaction ID: C4091368

Amount of Each Receipt this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Amy Ludwiczak Bowman

Mailing Address 8927 Fort Hunt Road

City

Alexandria

State

VA

Zip Code

22308

FEC ID number of contributing
federal political committee.

C

Name of Employer
Law Office of Amy L. Bowman, P.C.

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 8 / 2 0 0 9

Transaction ID: C4090000

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

2225.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Amy Ludwiczak Bowman

Mailing Address 8927 Fort Hunt Road

City

Alexandria

State

VA

Zip Code

22308

FEC ID number of contributing
federal political committee.

C

Name of Employer
Law Office of Amy L. Bowm-
an, P.C.

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 9 / 2 0 0 9

Transaction ID: C4090279

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Charlotte Camp

Mailing Address 6009 Coffey Woods Ct

City

Burke

State

VA

Zip Code

22015-2901

FEC ID number of contributing
federal political committee.

C

Name of Employer
NA

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 4 / 2 0 0 9

Transaction ID: C4090905

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

Barbara Lee Caputo

Mailing Address 12304 Westwood Hills Dr

City

Herndon

State

VA

Zip Code

20171-1507

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
automation consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 7 / 2 0 0 9

Transaction ID: C4092474

Amount of Each Receipt this Period

360.00

SUBTOTAL of Receipts This Page (optional)

660.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Joseph Cox

Mailing Address 4215 Stackler Dr

City

Fairfax

State

VA

Zip Code

22030-5560

FEC ID number of contributing
federal political committee.

C

Name of Employer
Catapult Consultants, LLC

Occupation

Consultant / CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 6 / 2 0 0 9

Transaction ID: C4090898

Amount of Each Receipt this Period

260.00

B.

Full Name (Last, First, Middle Initial)

Creigh Deeds

Mailing Address PO Box 533

City

Richmond

State

VA

Zip Code

23218-0533

FEC ID number of contributing
federal political committee.

C

Name of Employer
Senate of VA

Occupation

Senator

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 2 / 2 0 0 9

Transaction ID: C4090438

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Christine Ann Delta

Mailing Address 6619 Goldsboro Rd

City

Falls Church

State

VA

Zip Code

22042-4131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation

Self Employed

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 9 / 2 0 0 9

Transaction ID: C4089965

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

985.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Michele M Duell

Mailing Address 7413 Grace St

City

Springfield

State

VA

Zip Code

22150-3916

FEC ID number of contributing
federal political committee.

C

Name of Employer
Apptis

Occupation
VP

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 0 / 2 0 0 9

Transaction ID: C4091806

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Ronald Louis England

Mailing Address 7504 Woodside Ln Apt 24

City

Lorton

State

VA

Zip Code

22079-2011

FEC ID number of contributing
federal political committee.

C

Name of Employer
BearingPoint

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 8 / 2 0 0 9

Transaction ID: C4092497

Amount of Each Receipt this Period

360.00

C.

Full Name (Last, First, Middle Initial)

John William Foust

Mailing Address 7822 Swinks Mill Court

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 2 / 2 0 0 9

Transaction ID: C4089754

Amount of Each Receipt this Period

70.00

SUBTOTAL of Receipts This Page (optional)

680.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

John William Foust

Mailing Address 7822 Swinks Mill Court

City

McLean

State

VA

Zip Code

22102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 6 / 2 0 0 9

Transaction ID: C4089946

Amount of Each Receipt this Period

175.00

B.

Full Name (Last, First, Middle Initial)

Marc Alan Greidinger

Mailing Address 8306 Uxbridge Ct

City

Springfield

State

VA

Zip Code

22151-1720

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C4091330

Amount of Each Receipt this Period

225.00

C.

Full Name (Last, First, Middle Initial)

Joyce Henry-Schagorodski

Mailing Address 6208 Sudley Church Ct

City

Fairfax Station

State

VA

Zip Code

22039-1225

FEC ID number of contributing
federal political committee.

C

Name of Employer
Schagorodski & Associates
PLC (Law Of

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C4091363

Amount of Each Receipt this Period

375.00

SUBTOTAL of Receipts This Page (optional)

775.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Mary Ann Hovis

Mailing Address 2700 Green Holly Springs Ct

City

Oakton

State

VA

Zip Code

22124-1457

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation

Marketing Ex

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 3 / 2 0 0 9

Transaction ID: C4092435

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Mary Ann Hovis

Mailing Address 2700 Green Holly Springs Ct

City

Oakton

State

VA

Zip Code

22124-1457

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation

Marketing Ex

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 0 9

Transaction ID: C4092480

Amount of Each Receipt this Period

360.00

C.

Full Name (Last, First, Middle Initial)

Mark L Itzkoff

Mailing Address 6114 Emmett Guards Ct

City

Fairfax Station

State

VA

Zip Code

22039-1302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Olsson Frank Weeda

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 0 / 2 0 0 9

Transaction ID: C4091510

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

810.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Mark L Itzkoff

Mailing Address 6114 Emmett Guards Ct

City

Fairfax Station

State

VA

Zip Code

22039-1302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Olsson Frank Weeda

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 1 / 2 0 0 9

Transaction ID: C4091854

Amount of Each Receipt this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Mark L Itzkoff

Mailing Address 6114 Emmett Guards Ct

City

Fairfax Station

State

VA

Zip Code

22039-1302

FEC ID number of contributing
federal political committee.

C

Name of Employer
Olsson Frank Weeda

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 8 / 2 0 0 9

Transaction ID: C4092525

Amount of Each Receipt this Period

180.00

C.

Full Name (Last, First, Middle Initial)

Peter Kaldes

Mailing Address 6677 Hanson Ln

City

Lorton

State

VA

Zip Code

22079-1367

FEC ID number of contributing
federal political committee.

C

Name of Employer
Weil Gotshal & Manges

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 8 / 2 0 0 9

Transaction ID: C4092495

Amount of Each Receipt this Period

360.00

SUBTOTAL of Receipts This Page (optional)

565.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Drew Alan Kleibrink

Mailing Address 7223 Timber Ln

City

Falls Church

State

VA

Zip Code

22046-2733

FEC ID number of contributing
federal political committee.

C

Name of Employer
Nova Benefits

Occupation

Employee Benefit Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 2 / 2 0 0 9

Transaction ID: C4090795

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

William Edward Lahue

Mailing Address 9825 Laurel St

City

Fairfax

State

VA

Zip Code

22032

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation

Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 0 9 / 2 0 0 9

Transaction ID: C4090330

Amount of Each Receipt this Period

450.00

C.

Full Name (Last, First, Middle Initial)

Suchada Vichitakul Langley

Mailing Address 2435 Flint Hill Rd

City

Vienna

State

VA

Zip Code

22181-5448

FEC ID number of contributing
federal political committee.

C

Name of Employer
usda

Occupation

economist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 7 / 2 0 0 9

Transaction ID: C4092477

Amount of Each Receipt this Period

360.00

SUBTOTAL of Receipts This Page (optional)

1110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Besra Laws

Mailing Address 3203 Graham Rd

City

Falls Church

State

VA

Zip Code

22042-3735

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation

Store Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 0 / 2 0 0 9

Transaction ID: C4091768

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Walter John Mika, Jr

Mailing Address 5612 Eastbourne Dr

City

Springfield

State

VA

Zip Code

22151-1607

FEC ID number of contributing
federal political committee.

C

Name of Employer
Not Employed

Occupation

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C4092494

Amount of Each Receipt this Period

360.00

C.

Full Name (Last, First, Middle Initial)

Patricia Ann Millett

Mailing Address 4601 Millburn Ct

City

Alexandria

State

VA

Zip Code

22309-3165

FEC ID number of contributing
federal political committee.

C

Name of Employer
Akin, Gump, Strauss, Hauer
& Feld LLP

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C4091333

Amount of Each Receipt this Period

650.00

SUBTOTAL of Receipts This Page (optional)

1310.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Patrick Joseph Morrison

Mailing Address 6804 Jackson Ave

City

Falls Church

State

VA

Zip Code

22042

FEC ID number of contributing
federal political committee.

C

Name of Employer
International Association
of Fire Figh

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

AGP Education and Training

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 5 / 2 0 0 9

Transaction ID: C4089766

Amount of Each Receipt this Period

300.00

B.

Full Name (Last, First, Middle Initial)

Lina D'Gornaz Orr

Mailing Address 9409 Old Courthouse Rd

City

Vienna

State

VA

Zip Code

22182-2052

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Business Owner

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 2 / 2 0 0 9

Transaction ID: C4092415

Amount of Each Receipt this Period

1200.00

C.

Full Name (Last, First, Middle Initial)

Vickie Lee Plunkett

Mailing Address 4432 Sleaford Rd

City

Annandale

State

VA

Zip Code

22003-3925

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Occupation

Information Requested

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 9 / 2 0 0 9

Transaction ID: C4093149

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Nancy Angland Rice

Mailing Address 2217 Halcyon Ln

City

Vienna

State

VA

Zip Code

22181-3042

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C4091643

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Laura Austin Sonnenmark

Mailing Address 9114 Volunteer Drive

City

Alexandria

State

VA

Zip Code

22309

FEC ID number of contributing
federal political committee.

C

Name of Employer
self

Occupation
writer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 7 / 2 0 0 9

Transaction ID: C4089992

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)

Steven David Stone

Mailing Address 3608 Oakland Dr

City

Alexandria

State

VA

Zip Code

22310-2111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Stone Associates

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 2 / 2 0 0 9

Transaction ID: C4092421

Amount of Each Receipt this Period

350.00

SUBTOTAL of Receipts This Page (optional)

1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

robert John surovell

Mailing Address 7732 Tauxemont Rd

City

Alexandria

State

VA

Zip Code

22308-1055

FEC ID number of contributing
federal political committee.

C

Name of Employer
Surovell Markle Isaacs &
Levy

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 6 / 2 0 0 9

Transaction ID: C4091265

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

robert John surovell

Mailing Address 7732 Tauxemont Rd

City

Alexandria

State

VA

Zip Code

22308-1055

FEC ID number of contributing
federal political committee.

C

Name of Employer
Surovell Markle Isaacs &
Levy

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 0 / 2 0 0 9

Transaction ID: C4091804

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Scott A. Surovell

Mailing Address 7739 Tauxemont Rd

City

Alexandria

State

VA

Zip Code

22308-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Surovell Markle Isaacs &
Levy PLC

Occupation
Attorney

Receipt For: 2009

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 4 / 2 0 0 9

Transaction ID: C4090855

Amount of Each Receipt this Period

5.00

SUBTOTAL of Receipts This Page (optional)

330.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Scott A. Surovell

Mailing Address 7739 Tauxemont Rd

City

Alexandria

State

VA

Zip Code

22308-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Surovell Markle Isaacs &
Levy PLC

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 0 / 2 0 0 9

Transaction ID: C4091594

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

Scott A. Surovell

Mailing Address 7739 Tauxemont Rd

City

Alexandria

State

VA

Zip Code

22308-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Surovell Markle Isaacs &
Levy PLC

Occupation
Attorney

Receipt For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 1 / 2 0 0 9

Transaction ID: C4091805

Amount of Each Receipt this Period

5.00

C.

Full Name (Last, First, Middle Initial)

Scott A. Surovell

Mailing Address 7739 Tauxemont Rd

City

Alexandria

State

VA

Zip Code

22308-1056

FEC ID number of contributing
federal political committee.

C

Name of Employer
Surovell Markle Isaacs &
Levy PLC

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 8 / 2 0 0 9

Transaction ID: C4092475

Amount of Each Receipt this Period

180.00

SUBTOTAL of Receipts This Page (optional)

260.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 52

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Karen M Harris Tate

Mailing Address 11920 Richland Ln

City

Oak Hill

State

VA

Zip Code

20171-1516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fairfax County Public Sch-
ools

Occupation

Instructional Assistant Tech

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 0 / 2 0 0 9

Transaction ID: C4091727

Amount of Each Receipt this Period

225.00

SUBTOTAL of Receipts This Page (optional)

225.00

TOTAL This Period (last page this line number only)

13355.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 52

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)
Sheet Metal Workers' International Assoc

Mailing Address 1750 New York Avenue NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 1 5 / 2 0 0 9

Transaction ID: C4091677

Amount of Each Receipt this Period

350.00

B.

Full Name (Last, First, Middle Initial)
Sheet Metal Workers' International Assoc

Mailing Address 1750 New York Avenue NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee. **C** C00007542

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

0.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 2 / 2 0 0 9

Transaction ID: C4092146

Amount of Each Receipt this Period

-350.00

C.

Full Name (Last, First, Middle Initial)
Virginia Leadership Pac Multi-Candidate Committee

Mailing Address 800 So St Asaph St 301

City State Zip Code
Alexandria VA 22314

FEC ID number of contributing
federal political committee. **C** C00378356

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 9 / 2 0 0 9

Transaction ID: C4093156

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 52

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Virginia Commerce Bank

Mailing Address 5350 Lee Hwy

City

Arlington

State

VA

Zip Code

22207-1608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

316.21

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	2		2	0	0	9

Transaction ID: C4096242

Amount of Each Receipt this Period

0.55

Adjusting entry to bank
deposit

SUBTOTAL of Receipts This Page (optional)

0.55

TOTAL This Period (last page this line number only)

0.55

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 52

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Lofton Fairchild

Mailing Address 3012 Pecan Dr

City

Chalmette

State

LA

Zip Code

70043

FEC ID number of contributing
federal political committee.

C

Name of Employer
Elite Air Systems

Occupation

Air Conditioner Repairperson

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

-300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	0	9

Transaction ID: C4094786

Amount of Each Receipt this Period

-300.00

Individual contribution
returned.

SUBTOTAL of Receipts This Page (optional)

-300.00

TOTAL This Period (last page this line number only)

-300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 52

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Virginia Commerce Bank

Mailing Address 5350 Lee Hwy

City

Arlington

State

VA

Zip Code

22207-1608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.21

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 6 / 2 0 0 9

Transaction ID: C4096245

Amount of Each Receipt this Period

90.00

Adjusting entry to correct
a bank deposit

B.

Full Name (Last, First, Middle Initial)

Virginia Commerce Bank

Mailing Address 5350 Lee Hwy

City

Arlington

State

VA

Zip Code

22207-1608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.21

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 9

Transaction ID: C4093978

Amount of Each Receipt this Period

225.66

SUBTOTAL of Receipts This Page (optional)

315.66

TOTAL This Period (last page this line number only)

315.66

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 / 52

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D212016 Date of Disbursement																				
Mailing Address PO Box 360001	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	5		2	0	0	9												
City Ft Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement credit card discount Candidate Name	<table border="1"> <tr> <td colspan="10">6.98</td> </tr> </table>	6.98																			
6.98																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D212017 Date of Disbursement																				
Mailing Address PO Box 360001	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	5		2	0	0	9												
City Ft Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement credit card discount Candidate Name	<table border="1"> <tr> <td colspan="10">1.09</td> </tr> </table>	1.09																			
1.09																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D212020 Date of Disbursement																				
Mailing Address PO Box 360001	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	8		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	8		2	0	0	9												
City Ft Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement credit card discount Candidate Name	<table border="1"> <tr> <td colspan="10">1.09</td> </tr> </table>	1.09																			
1.09																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

9.16

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D212021 Date of Disbursement																				
Mailing Address PO Box 360001	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	9		2	0	0	9												
City Ft Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement credit card discount Candidate Name	<table border="1"> <tr> <td colspan="10">6.98</td> </tr> </table>	6.98																			
6.98																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D212042 Date of Disbursement																				
Mailing Address PO Box 360001	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	2		2	0	0	9												
City Ft Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement credit card discount Candidate Name	<table border="1"> <tr> <td colspan="10">9.30</td> </tr> </table>	9.30																			
9.30																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D212043 Date of Disbursement																				
Mailing Address PO Box 360001	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	2		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	2		2	0	0	9												
City Ft Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement credit card discount Candidate Name	<table border="1"> <tr> <td colspan="10">9.30</td> </tr> </table>	9.30																			
9.30																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

25.58

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D212051 Date of Disbursement																				
Mailing Address PO Box 360001	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	5		2	0	0	9												
City Ft Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement credit card discount Candidate Name	<table border="1"> <tr> <td colspan="10">12.72</td> </tr> </table>	12.72																			
12.72																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D212052 Date of Disbursement																				
Mailing Address PO Box 360001	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	6		2	0	0	9												
City Ft Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement credit card discount Candidate Name	<table border="1"> <tr> <td colspan="10">15.04</td> </tr> </table>	15.04																			
15.04																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D212054 Date of Disbursement																				
Mailing Address PO Box 360001	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	0		2	0	0	9												
City Ft Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement credit card discount Candidate Name	<table border="1"> <tr> <td colspan="10">71.30</td> </tr> </table>	71.30																			
71.30																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

99.06

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 28 / 52

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D212055 Date of Disbursement																				
Mailing Address PO Box 360001	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	0		2	0	0	9												
City Ft Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement credit card discount Candidate Name	<table border="1"> <tr> <td colspan="10">14.73</td> </tr> </table>	14.73																			
14.73																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D212056 Date of Disbursement																				
Mailing Address PO Box 360001	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	1		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	1		2	0	0	9												
City Ft Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement credit card discount Candidate Name	<table border="1"> <tr> <td colspan="10">13.96</td> </tr> </table>	13.96																			
13.96																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) American Express	Transaction ID: D212064 Date of Disbursement																				
Mailing Address PO Box 360001	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	6		2	0	0	9												
City Ft Lauderdale State FL Zip Code 33336-0001	Amount of Each Disbursement this Period																				
Purpose of Disbursement credit card discount Candidate Name	<table border="1"> <tr> <td colspan="10">0.78</td> </tr> </table>	0.78																			
0.78																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

29.47

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 52

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001	Transaction ID: D212067 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 8 / 2 0 0 9</div> </div>
City State Zip Code Ft Lauderdale FL 33336-0001 Purpose of Disbursement credit card discount Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Amount of Each Disbursement this Period <div>3.10</div>
B. Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 360001 City State Zip Code Ft Lauderdale FL 33336-0001 Purpose of Disbursement credit card discount Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Transaction ID: D212083 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 0 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>11.16</div>
C. Full Name (Last, First, Middle Initial) Artistic Photo Services LLC Mailing Address Peter Klosky, Photographer 115 N. City State Zip Code Sterling VA 20164 Purpose of Disbursement photographic services Candidate Name <div> <div>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> <div>State: District:</div> </div>	Transaction ID: D212040 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 2 / 2 0 0 9</div> </div> Amount of Each Disbursement this Period <div>250.00</div>

SUBTOTAL of Disbursements This Page (optional)

264.26

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 52

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Auburn Quad Inc.

Mailing Address P O Box 390728

City
Cambridge

State
MA

Zip Code
02139

Purpose of Disbursement
donor processing fee

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212046

Date of Disbursement

01 / 14 / 2009

Amount of Each Disbursement this Period

1.38

B.

Full Name (Last, First, Middle Initial)

Bank Street Band

Mailing Address 13529 Ann Grigsby Circle

City
Centreville

State
VA

Zip Code
20120

Purpose of Disbursement
entertainment fund raising expense

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212061

Date of Disbursement

01 / 25 / 2009

Amount of Each Disbursement this Period

1440.00

C.

Full Name (Last, First, Middle Initial)

Brooke Rental Center

Mailing Address 321 Mill St. NE

City
Vienna

State
VA

Zip Code
22180

Purpose of Disbursement
dance floor rental

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212041

Date of Disbursement

01 / 12 / 2009

Amount of Each Disbursement this Period

918.00

SUBTOTAL of Disbursements This Page (optional)

2359.38

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 31 / 52

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

D & P Printing

Mailing Address 5641 - I General Washington Drive

City Alexandria State VA Zip Code 22312

Purpose of Disbursement
Party fundraising event flyer

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212028

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

744.45

B.

Full Name (Last, First, Middle Initial)

D & P Printing

Mailing Address 5641 - I General Washington Drive

City Alexandria State VA Zip Code 22312

Purpose of Disbursement
Party fundraising event program pri

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212029

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

446.25

C.

Full Name (Last, First, Middle Initial)

D & P Printing

Mailing Address 5641 - I General Washington Drive

City Alexandria State VA Zip Code 22312

Purpose of Disbursement
party fundraiser thank you cards pr

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212039

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

162.75

SUBTOTAL of Disbursements This Page (optional)

1353.45

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

D & P Printing

Mailing Address 5641 - I General Washington Drive

City Alexandria State VA Zip Code 22312

Purpose of Disbursement
sample ballot local election

Candidate Name

006
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212073

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

1194.00

B.

Full Name (Last, First, Middle Initial)

D & P Printing

Mailing Address 5641 - I General Washington Drive

City Alexandria State VA Zip Code 22312

Purpose of Disbursement
precinct letters local election

Candidate Name

006
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212074

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

926.48

C.

Full Name (Last, First, Middle Initial)

D & P Printing

Mailing Address 5641 - I General Washington Drive

City Alexandria State VA Zip Code 22312

Purpose of Disbursement
absentee letter local election

Candidate Name

006
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212075

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

319.20

SUBTOTAL of Disbursements This Page (optional)

2439.68

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

de Lage Landen Financial Services

Mailing Address 1111 Old Eagle School Rd

City
Wayne

State
PA

Zip Code
19087

Purpose of Disbursement
copier lease

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212080

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

246.75

B.

Full Name (Last, First, Middle Initial)

Discover Business Service Settlement

Mailing Address P O Box 30943

City
Salt Lake City

State
UT

Zip Code
84130-0943

Purpose of Disbursement
credit card discount

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212015

Date of Disbursement

01 / 05 / 2009

Amount of Each Disbursement this Period

19.10

C.

Full Name (Last, First, Middle Initial)

Intuit, Inc

Mailing Address Box 2946

City
Phoenix

State
AZ

Zip Code
85062-9979

Purpose of Disbursement
Software upgrade

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212053

Date of Disbursement

01 / 16 / 2009

Amount of Each Disbursement this Period

755.79

SUBTOTAL of Disbursements This Page (optional)

1021.64

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Jimmy's Old Town Tavern

Mailing Address 697 Spring Street

City
Herndon

State
VA

Zip Code
20170

Purpose of Disbursement
catering fund raising expense

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212062

Date of Disbursement

01 / 25 / 2009

Amount of Each Disbursement this Period

9803.75

B.

Full Name (Last, First, Middle Initial)

Jimmy's Old Town Tavern

Mailing Address 697 Spring Street

City
Herndon

State
VA

Zip Code
20170

Purpose of Disbursement
catering fund raising expense

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212063

Date of Disbursement

01 / 25 / 2009

Amount of Each Disbursement this Period

252.95

C.

Full Name (Last, First, Middle Initial)

Mark Richards

Mailing Address 18108 Camdenhurst Drive

City
Gainesville

State
VA

Zip Code
20155

Purpose of Disbursement
Graphics February newsletter

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212079

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional)

10456.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Merchant Service</p> <p>Mailing Address c/o World Bankcard Services 10855 Fairfax Blvd. 3rd Fl</p> <p>City Fairfax State VA Zip Code 22030</p> <p>Purpose of Disbursement credit card processing fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D212014</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 5 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div>572.95</div> </p> <p>Category/Type <div>003</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) MidPhase Hosting Services, Inc.</p> <p>Mailing Address ATTN: Accounts & Billing 223 W. J</p> <p>City Chicago State IL Zip Code 60606</p> <p>Purpose of Disbursement website hosting charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D212025</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 0 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div>149.85</div> </p> <p>Category/Type <div>001</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) MidPhase Hosting Services, Inc.</p> <p>Mailing Address ATTN: Accounts & Billing 223 W. J</p> <p>City Chicago State IL Zip Code 60606</p> <p>Purpose of Disbursement website hosting charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D212077</p> <p>Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 9 / 2 0 0 9</div> </div> </p> <p>Amount of Each Disbursement this Period <div>149.85</div> </p> <p>Category/Type <div>001</div> </p>

SUBTOTAL of Disbursements This Page (optional)

872.65

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Ms. Kristen Alcorta

Mailing Address 3029 N Westmoreland St

City Arlington State VA Zip Code 22213

Purpose of Disbursement
Fund raising expense - t shirts

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212045

Date of Disbursement

01 / 14 / 2009

Amount of Each Disbursement this Period

472.00

B.

Full Name (Last, First, Middle Initial)

Nauticon

Mailing Address 15878 Gaither Dr Gaithersburg MD

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement
copier maintenance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212036

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

138.15

C.

Full Name (Last, First, Middle Initial)

Nauticon

Mailing Address 15878 Gaither Dr Gaithersburg MD

City Gaithersburg State MD Zip Code 20877

Purpose of Disbursement
copier maintenance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212078

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

904.02

SUBTOTAL of Disbursements This Page (optional)

1514.17

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 37 / 52

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

NGP Software, Inc.

Mailing Address 1225 Eye Street, NW Suite 1225

City
Washington

State
DC

Zip Code
20005

Purpose of Disbursement
accounting and donor database servi
Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212037

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

1050.00

B.

Full Name (Last, First, Middle Initial)

Northern Virginia Community College

Mailing Address Ernst Cultural Center 8333 Little

City
Annandale

State
VA

Zip Code
22003

Purpose of Disbursement
space rental inauguration ball
Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212066

Date of Disbursement

01 / 28 / 2009

Amount of Each Disbursement this Period

280.00

C.

Full Name (Last, First, Middle Initial)

Springfield Golf and Country Club

Mailing Address 8301 Old Keene Mill Road

City
Springfield

State
VA

Zip Code
22152

Purpose of Disbursement
Room rental party fund raising
Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212031

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

3336.25

SUBTOTAL of Disbursements This Page (optional)

4666.25

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A. Full Name (Last, First, Middle Initial) Sprint	Transaction ID: D212019 Date of Disbursement																				
Mailing Address P O Box 8077	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	6		2	0	0	9												
City London State KY Zip Code 40742	Amount of Each Disbursement this Period																				
Purpose of Disbursement Blackberry monthly service	<table border="1"> <tr> <td>106.94</td> </tr> </table>	106.94																			
106.94																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) TM 2815, LLC	Transaction ID: D212026 Date of Disbursement																				
Mailing Address 2815 Hartland Rd Ste 300	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	0		2	0	0	9												
City Falls Church State VA Zip Code 22043-3548	Amount of Each Disbursement this Period																				
Purpose of Disbursement December lease space and utilities	<table border="1"> <tr> <td>3599.25</td> </tr> </table>	3599.25																			
3599.25																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) TM 2815, LLC	Transaction ID: D212027 Date of Disbursement																				
Mailing Address 2815 Hartland Rd Ste 300	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	0		2	0	0	9												
City Falls Church State VA Zip Code 22043-3548	Amount of Each Disbursement this Period																				
Purpose of Disbursement January lease space and utilities	<table border="1"> <tr> <td>3599.25</td> </tr> </table>	3599.25																			
3599.25																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

7305.44

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

TM 2815, LLC

Mailing Address 2815 Hartland Rd
Ste 300

City Falls Church State VA Zip Code 22043-3548

Purpose of Disbursement
February lease space and utilities

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212082

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

3599.25

B.

Full Name (Last, First, Middle Initial)

US Postal Service - Merrifield

Mailing Address 8409 Lee Hwy

City Merrifield State VA Zip Code 22081-0002

Purpose of Disbursement
precinct letters non federal electi

Candidate Name

006
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212057

Date of Disbursement

01 / 23 / 2009

Amount of Each Disbursement this Period

3367.66

C.

Full Name (Last, First, Middle Initial)

US Postal Service - Merrifield

Mailing Address 8409 Lee Hwy

City Merrifield State VA Zip Code 22081-0002

Purpose of Disbursement
Party fundraising event postage

Candidate Name

003
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212018

Date of Disbursement

01 / 06 / 2009

Amount of Each Disbursement this Period

650.00

SUBTOTAL of Disbursements This Page (optional)

7616.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A. Full Name (Last, First, Middle Initial) Verizon Mailing Address P O Box 17577	Transaction ID: D212030 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	0		2	0	0	9	
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		1	0		2	0	0	9													
City Baltimore State MD Zip Code 21297 Purpose of Disbursement telephone services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <table border="1"> <tr> <td>382.78</td> </tr> </table>	382.78																				
382.78																						
B. Full Name (Last, First, Middle Initial) Verizon Mailing Address P O Box 17577 City Baltimore State MD Zip Code 21297 Purpose of Disbursement telephone services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D212072 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>422.85</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	9		2	0	0	9	422.85
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		2	9		2	0	0	9													
422.85																						
C. Full Name (Last, First, Middle Initial) Virginia ABC Mailing Address Control P. O. Box 27491 City Richmond State VA Zip Code 23261-7491 Purpose of Disbursement liquor license Inaugural Ball Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D212013 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> Amount of Each Disbursement this Period <table border="1"> <tr> <td>55.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	2		2	0	0	9	55.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	1		0	2		2	0	0	9													
55.00																						

SUBTOTAL of Disbursements This Page (optional)

860.63

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A. Full Name (Last, First, Middle Initial) Virginia Commerce Bank	Transaction ID: D212044 Date of Disbursement																				
Mailing Address 5350 Lee Hwy	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	3		2	0	0	9												
City Arlington State VA Zip Code 22207-1608	Amount of Each Disbursement this Period																				
Purpose of Disbursement bank service charge Candidate Name	<table border="1"> <tr> <td colspan="10">30.00</td> </tr> </table>	30.00																			
30.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Vonage	Transaction ID: D212022 Date of Disbursement																				
Mailing Address 23 Main Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	9		2	0	0	9												
City Holmdel State NJ Zip Code 07733	Amount of Each Disbursement this Period																				
Purpose of Disbursement telephone services Candidate Name	<table border="1"> <tr> <td colspan="10">62.44</td> </tr> </table>	62.44																			
62.44																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Vonage	Transaction ID: D212023 Date of Disbursement																				
Mailing Address 23 Main Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	9		2	0	0	9												
City Holmdel State NJ Zip Code 07733	Amount of Each Disbursement this Period																				
Purpose of Disbursement telephone services Candidate Name	<table border="1"> <tr> <td colspan="10">4718.88</td> </tr> </table>	4718.88																			
4718.88																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4811.32

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 42 / 52

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.	Full Name (Last, First, Middle Initial) Vonage		Transaction ID: D212024 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 9	
	Mailing Address 23 Main Street			
	City Holmdel	State NJ	Zip Code 07733	Amount of Each Disbursement this Period 40.46
	Purpose of Disbursement telephone services		001 Category/ Type	
	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				
B.	Full Name (Last, First, Middle Initial) Laura Austin Sonnenmark		Transaction ID: D212032 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 9	
	Mailing Address 9114 Volunteer Drive			
	City Alexandria	State VA	Zip Code 22309	Amount of Each Disbursement this Period 84.55
	Purpose of Disbursement party building event food		001 Category/ Type	
	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				
C.	Full Name (Last, First, Middle Initial) Safeway Store # 1283		Transaction ID: D212089 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 0 / 2 0 0 9	
	Mailing Address 8646 Richmond Hwy			
	City Alexandria	State VA	Zip Code 22309	Amount of Each Disbursement this Period 84.55
	Purpose of Disbursement party building event food		001 Category/ Type	
	Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

125.01

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Laura Austin Sonnenmark

Mailing Address 9114 Volunteer Drive

City Alexandria State VA Zip Code 22309

Purpose of Disbursement
party building event food

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212033

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

380.57

B.

Full Name (Last, First, Middle Initial)

Costco Newington Springfield

Mailing Address 7373 Boston Boulevard

City Springfield State VA Zip Code 22153

Purpose of Disbursement
party building event food

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212088

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

380.57

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Laura Austin Sonnenmark

Mailing Address 9114 Volunteer Drive

City Alexandria State VA Zip Code 22309

Purpose of Disbursement
party building event mailing labels

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212034

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

27.99

SUBTOTAL of Disbursements This Page (optional)

408.56

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Staples Richmond Highway

Mailing Address 7708 Richmond Highway

City Alexandria State VA Zip Code 22304

Purpose of Disbursement
party bulding event maling labels

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212087

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

27.99

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

Ms. Janet Louise Myhre

Mailing Address 4012 Woodley Dr

City Alexandria State VA Zip Code 22309-2541

Purpose of Disbursement
projector for party training

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212038

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

682.49

C.

Full Name (Last, First, Middle Initial)

Staples Mount Vernon Plaza

Mailing Address 7708 Richmond Highway

City Alexandria State VA Zip Code 22304

Purpose of Disbursement
projector for party training

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212086

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

682.49

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

682.49

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 45 / 52

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Carole Burk

Mailing Address 10150 Hampton Rd.

City State Zip Code
Fairfax Station VA 22039

Purpose of Disbursement
tablecloths for party fundraiser

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212065

Date of Disbursement

01 / 28 / 2009

Amount of Each Disbursement this Period

212.45

B.

Full Name (Last, First, Middle Initial)

Reliable Paper, Inc.

Mailing Address 1030 A Northpoint Pkwy SE

City State Zip Code
Acworth GA 30102

Purpose of Disbursement
tablecloths party fundraiser

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212085

Date of Disbursement

01 / 28 / 2009

Amount of Each Disbursement this Period

212.45

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

Ruth Kristine Miller

Mailing Address 9102 Sweet Spice Ct

City State Zip Code
Springfield VA 22152

Purpose of Disbursement
party fundraiser t-shirts

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212076

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

1174.97

SUBTOTAL of Disbursements This Page (optional)

1387.42

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 46 / 52

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Kennedy Graphics, Inc.

Mailing Address P.O. Box 1000

City
Lees Summit

State
MO

Zip Code
64063

Purpose of Disbursement
party fundraiser t-shirts

Candidate Name

003

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212084

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1174.97

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

48309.23

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 47 / 52

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Sharon Bulova For Chairman

Mailing Address P O Box 19

City
Fairfax Station

State
VA

Zip Code
22039

Purpose of Disbursement
County Committee Contribution

Candidate Name
Sharon Bulova For Chairman

008
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212058

Date of Disbursement

01 / 25 / 2009

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Sharon Bulova For Chairman

Mailing Address P O Box 19

City
Fairfax Station

State
VA

Zip Code
22039

Purpose of Disbursement
Womens Committee contribution

Candidate Name
Sharon Bulova For Chairman

008
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212059

Date of Disbursement

01 / 25 / 2009

Amount of Each Disbursement this Period

800.00

C.

Full Name (Last, First, Middle Initial)

Sharon Bulova For Chairman

Mailing Address P O Box 19

City
Fairfax Station

State
VA

Zip Code
22039

Purpose of Disbursement
Mt. Vernon Committee Contribution

Candidate Name
Sharon Bulova For Chairman

008
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D212060

Date of Disbursement

01 / 25 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

6300.00

TOTAL This Period (last page this line number only)

6300.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A. Full Name (Last, First, Middle Initial) Advantage Business Payroll	Transaction ID: D212068 Date of Disbursement
Mailing Address Auburn Branch P O Box 1330 Auburn	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 9 / 2 0 0 9</div> </div>
City Auburn State ME Zip Code 04211-1330	Amount of Each Disbursement this Period
Purpose of Disbursement payroll processing fee Candidate Name	<div> <div>132.22</div> <div>001 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Advantage Business Payroll	Transaction ID: D212069 Date of Disbursement
Mailing Address Auburn Branch P O Box 1330 Auburn	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 9 / 2 0 0 9</div> </div>
City Auburn State ME Zip Code 04211-1330	Amount of Each Disbursement this Period
Purpose of Disbursement wages & salaries Candidate Name	<div> <div>3638.80</div> <div>001 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Advantage Business Payroll	Transaction ID: D212070 Date of Disbursement
Mailing Address Auburn Branch P O Box 1330 Auburn	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 9 / 2 0 0 9</div> </div>
City Auburn State ME Zip Code 04211-1330	Amount of Each Disbursement this Period
Purpose of Disbursement employee taxes Candidate Name	<div> <div>1691.97</div> <div>001 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

5462.99

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Advantage Business Payroll

Mailing Address Auburn Branch P O Box 1330 Auburn

City Auburn State ME Zip Code 04211-1330

Purpose of Disbursement
employer taxes

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212071

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

550.48

B.

Full Name (Last, First, Middle Initial)

Advantage Business Payroll

Mailing Address Auburn Branch P O Box 1330 Auburn

City Auburn State ME Zip Code 04211-1330

Purpose of Disbursement
payroll processing fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212047

Date of Disbursement

01 / 15 / 2009

Amount of Each Disbursement this Period

58.22

C.

Full Name (Last, First, Middle Initial)

Advantage Business Payroll

Mailing Address Auburn Branch P O Box 1330 Auburn

City Auburn State ME Zip Code 04211-1330

Purpose of Disbursement
wages & salaries

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212048

Date of Disbursement

01 / 15 / 2009

Amount of Each Disbursement this Period

1249.04

SUBTOTAL of Disbursements This Page (optional)

1857.74

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Advantage Business Payroll

Mailing Address Auburn Branch P O Box 1330 Auburn

City Auburn State ME Zip Code 04211-1330

Purpose of Disbursement
employee taxes

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212049

Date of Disbursement

01 / 15 / 2009

Amount of Each Disbursement this Period

481.73

B.

Full Name (Last, First, Middle Initial)

Advantage Business Payroll

Mailing Address Auburn Branch P O Box 1330 Auburn

City Auburn State ME Zip Code 04211-1330

Purpose of Disbursement
employer taxes

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212050

Date of Disbursement

01 / 15 / 2009

Amount of Each Disbursement this Period

189.87

C.

Full Name (Last, First, Middle Initial)

Blue Cross Blue Shield

Mailing Address PO Box 79749

City Baltimore State MD Zip Code 21279-0749

Purpose of Disbursement
employee health insurance premium

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212035

Date of Disbursement

01 / 10 / 2009

Amount of Each Disbursement this Period

209.00

SUBTOTAL of Disbursements This Page (optional)

880.60

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Fairfax County Democratic Committee

A.

Full Name (Last, First, Middle Initial)

Blue Cross Blue Shield

Mailing Address PO Box 79749

City
Baltimore

State
MD

Zip Code
21279-0749

Purpose of Disbursement
employee health insurance premium

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D212081

Date of Disbursement

/ /

Amount of Each Disbursement this Period

209.00

SUBTOTAL of Disbursements This Page (optional)

209.00

TOTAL This Period (last page this line number only)

8410.33

Form/Schedule: **F3XN**

Transaction ID:

The Fairfax County Democratic Committee will continue to file monthly reports in 2009 due to paid staff who devote more than 25 percent of their compensated time to federal elections. The full cost of paid staff is reported as FEA on Schedule B supporting line 30(b) of our report. The Committee does not raise funds for any federal candidate. Fund raising is exclusively for the benefit of the Fairfax County Democratic Committee. So all expenses reported for fund raising involve party fund raising only. Virtually all activities of the Fairfax County Democratic Committee in 2009 will focus on state and local (non-federal) elections, unless occasion arises for a special election involving a federal candidate. The Committee began allocating administrative expenses in June 2008; however, shortages of funds in our non federal account prevent us from transferring non federal account funds to our federal account to offset shared administrative expenses. Once the non federal account balance is adequate to make these transfers in 2009, then the transfers will resume. Meanwhile, all administrative expenses of the committee will be paid 100 percent with federal funds.
